24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
	0 000403733
Check if 24-hour report X 48-hour report New report Amends re	port filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Action Fund Inc.	06 28 2014
Mailing Address 434 West 33rd Street	Amount
City State Zip Code	390.00
New York NY 10001	Transaction ID : B499859 Date of Disbursement or Obligation
Purpose of Expenditure List rental Category/ Type 00	06 28 2014
Name of Federal Candidate Support	Office Sought: House District:
Kay Hagan Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 144156.56	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Planned Parenthood Health Systems Action Fund	07 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 South Boylan Ave.	
	Amount
City State Zip Code	3312.50
Raleigh NC 27603	Transaction ID: B499833 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Columbia Category/ C	M M / D D / Y Y Y Y
Volunteer recruitment phone banks Type Oategory Type	4 07 01 2014
Name of Federal Candidate Support	Office Sought: House District:
Kay Hagan Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 144156.56	Disbursement For: Primary ☐ General 2014 Other (specify) ▶
	Curior (opcority) /
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 3702.50
(b) SUBTOTAL of Unitemized Independent Expenditures	···· >
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Aletheia Henry [Electronically Filed] Da	ate 06 27 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
	LO IDENTINIOATION NOMBER V			
Planned Parenthood Votes	C C00489799			
Check if 24-hour report				
Full Name of Payee Date of	f Public Distribution/Dissemination			
	07			
Mailing Address 100 South Boylan Ave. Amoun	nt			
City State Zip Code	3312.50			
	action ID: B499834 f Disbursement or Obligation			
Purpose of Expenditure Category/	07 01 7 2014			
Name of Federal Candidate Support Office Sought:	: House District:			
Kay Hagan Oppose Presider	nt Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought Disbursement 2014 Ott	For: Primary ⊠ General her (specify) ▶			
Planned Parenthood Health Systems Action Fund	of Public Distribution/Dissemination			
City State Zip Code	4637.50			
Date o	ction ID: B499835 of Disbursement or Obligation			
Purpose of Expenditure Persuasion canvasses Category/ Type 004	07 01 / Y Y Y Y Y			
Name of Federal Candidate Support Office Sought	t: House District:			
Kay Hagan Oppose Preside	ent Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought Disbursement 2014 Otl	t For: Primary X General ther (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	7950.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	7			
(c) TOTAL Independent Expenditures	1 7 1 1 7 1			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Aletheia Henry [Electronically Filed] Date 06	27 2014			
Signature				

PAGE 2

OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ENT EXI EN	JITONES	PAGE 3 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report X 48-hour report	X New re	port Amends repo	rt filed on
Full Name of Payee Planned Parenthood Health Sys	tems Action F	- und	Date of Public Distribution/Dissemination
Mailing Address 100 South Boylan Ave.			07 01 2014 Amount
City	State	Zin Codo	1987.50
Raleigh	NC	Zip Code 27603	Transaction ID : B499836 Date of Disbursement or Obligation
Purpose of Expenditure Persuasion events		Category/ Type 004	07 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Kay Hagan		Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		144156.56	Disbursement For:
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination 07 01 01 02014
Mailing Address 1110 Vermont Ave N.W.			Amount
City	State	Zip Code	11338.13
Washington	DC	20005	Transaction ID : B499837 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer recruitment phone banks		Category/ Type 004	07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought: House District:
Kay Hagan		Oppose	President X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		144156.56	Disbursement For: Primary General 2014 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	ditures		13325.63
(b) SUBTOTAL of Unitemized Independent Expo	enditures		>
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Aletheia Henry Signature	[Electro	nically Filed] Date	06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- 3			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	VI EXI EIVE	ITOTILO		PAGE 4 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
Community Outreach Group LLC				01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W.			Amount	
City	State	Zip Code		11338.13
Washington	DC 20005			ction ID : B499838 Disbursement or Obligation
Purpose of Expenditure Persuasion phone banks		Category/ Type 004		07 01 7 2014
Name of Federal Candidate		X Support	Office Sought:	House District:
Kay Hagan		Oppose	Presider	
Calendar Year-To-Date Per Election for Office Sought		144156.56	Disbursement 2014 Oth	For:
Full Name of Payee			Date of	Public Distribution/Dissemination
Community Outreach Group LLC				07
Mailing Address 1110 Vermont Ave N.W.			Amoun	t
City	State	Zip Code	-	15873.39
Washington	DC	20005		tion ID : B499839 Disbursement or Obligation
Purpose of Expenditure Persuasion canvasses		Category/ Type 004		01 Y 2014
Name of Federal Candidate		X Support	Office Sought:	House District:
Kay Hagan		Oppose	Presider	
Calendar Year-To-Date Per Election for Office Sought	7 7	144156.56	Disbursement 2014 Oth	For: Primary X General ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditu	res			27211.52
,				7 7 7
(b) SUBTOTAL of Unitemized Independent Expend	itures		. •	7
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Aletheia Henry Signature	[Electron	ically Filed] Date	06	27 2014
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ILO	PAGE 5 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report X 48-hour report New report	Amends report filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee Community Outreach Group LLC	1	Date of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W.		07 01 2014 Amount
		2000.00
City State Zip C Washington DC 2000		6802.88 Fransaction ID: B499840 Date of Disbursement or Obligation
Purpose of Expenditure Persuasion events Cat	tegory/ Type 004	07 / 01 / 2014
Name of Federal Candidate	Support Office S	Sought: House District:
Kay Hagan		President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		ement For:
Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination
Mailing Address 434 West 33rd Street		06 28 7 2014
		Amount
City State Zip	Code	390.00
New York NY 100		ransaction ID : B499886 Date of Disbursement or Obligation
Purpose of Expenditure List rental Cat	tegory/ Type 004	06 / 28 / 2014
Name of Federal Candidate	Support Office S	Sought: House District:
Thom Tillis	∑ Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	Disburs 2014	ement For: Primary
(a) CURTOTAL of the rised had a seed of Europe Theory	Г	7400.00
(a) SUBTOTAL of Itemized Independent Expenditures	• • • • • • • • • • • • • • • • • • •	7192.88
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······································	59382.53
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Aletheia Henry [Electronically	Filed] Date 06	27 2014
Signature		